

# SCOTTISH **PUBLIC SERVICES** OMBUDSMAN

**ANNUAL REPORT & ACCOUNTS 2017/18**





## Welcome to the SPSO's 2017-18 Annual Report

Read more on page 4

We handled  
**904**  
enquiries

Read more on page 7



We received

**4,125**

complaints and closed

**4,226**

complaints

Read more on pages 8-9

We upheld

**58.8%**

of complaints

Read more  
on page 11



We handled

**764**

Scottish Welfare Fund  
applications



Read more  
on page 12

The first full year  
of **NHS** model  
Complaint Handling  
procedure

Read more on page 15

# 38%

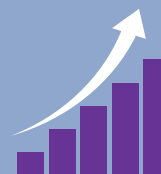
of cases needed multiple pieces of specialist advice

Read more on page 11

We made  
**635**

recommendations about learning and improvement

Read more on page 20



We closed



# 97.1%

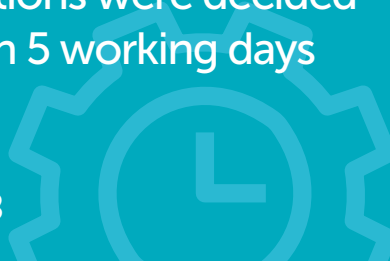
of complaints within 260 days against a target of 95%

Read more on page 26

# 100%

of Crisis Grant review applications were decided within 5 working days

Read more on page 28



Our budget was  
**£4.3m**

Read more on page 35



We are developing a **Support and Intervention Policy**

Read more on page 39

# Overview

## Ombudsman's introduction

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### Performance highlights

I think it fair to say, it's been a challenging year for every single part of the organisation. When I took up office in May 2017 we had high complaint caseloads, increasing Scottish Welfare Fund review applications, and compliance monitoring of the NHS, social work and Integration Joint Boards implementation of their new model complaints handling procedures. We also had to start planning for our office move in autumn 2018 and the taking on of new powers as the Independent National Whistleblowing Officer for the NHS in Scotland in 2019.

This was on top of all the business as usual such as our advice service, training provision, advice and guidance, corporate management, stakeholder engagement and clearing the backlog of cases from when there was a spike in complaints in 2015.

My personal highlights included:

- clearing our backlog of cases in December 2017 (see page 27)
- laying of our new strategic plan before Parliament in early 2018 (see page 25)
- maintaining a good level of output. We marginally missed one of our performance indicators, but given the number of old cases we closed, overall performance was excellent (see page 26)
- issuing of our thematic report "Making Complaints Work for Everyone" (see page 26)
- engagement with a wide range of stakeholders about a range of matters from good complaints handling to giving evidence to Parliament (see pages 22–24).

## The challenge for us now is to make complaints handling and learning from complaints even better.

### Key issues and risks

We actively monitor and review our approach to risk. As a result, we have revised our risk policy and monitoring. This year (2018–19) we have introduced a strategic risk register, to reflect our strategic risks and how they impact on, and integrate with, operational risks and delivery of our strategic and business plans.

Like many organisations, we recognise and are addressing the increasing risks associated with cyber security. Our chief risk, however, remains that of resources. Clearing our backlog of cases moved the work on within our processes, but for some months we had exceptionally high personal workloads. The resources we have are sufficient only for as long as there is no increase in complaints coming in. If complaint volumes rise by more than a few percent, our resources are no longer sufficient to maintain current levels of performance.

It is not only timescales that are affected: high caseloads impacts on us in other ways and I remain deeply concerned about the impact of high caseloads on staff wellbeing.

# Ombudsman's introduction

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## Quality Assurance

We strive to deliver good quality and pride ourselves on being a learning organisation. Quality Assurance of our casework is an integral part of our business and an important source of learning and improvement.

In 2018–19 we are taking a different approach: a risk based approach. We are putting in place a quality assurance plan based on identifying types of cases or decisions that present the highest potential risk. For example a review of cases where we consider whether complaints were made to us within time limits and how we applied our discretionary powers. Our aim is to ensure we are making good decisions consistently.

## Improving complaints handling

The Complaints Standards Authority passed a major milestone: 2017–18 saw the implementation of a model complaints handling procedure by the NHS. This means that all Scottish public services now take the same, two-stage approach to complaints handling.

The challenge for us now is how we build on that, with public bodies and complainants, to make complaints handling and learning from complaints even better.

## Future

Things are not standing still for us.

This year we put in place a challenging business plan, to which everyone in the organisation was able to contribute. It recognises both the huge volume of the “business as usual” work we do,

Laid before the Scottish Parliament by the Scottish Public Services Ombudsman in September 2018 in pursuance of section 17(1) and (3) of the Scottish Public Services Ombudsman Act 2002.

and the work we are doing to develop complaint handling, drive public sector improvement and develop ourselves. Derived from, and linked to, our new strategic aims, it highlights just how wide-ranging our functions are in practice.

Oh, and there are a few more things coming up too:

- new offices
- implementation of the Independent National Whistleblowing Officer role for the NHS
- developing a Support and Intervention Policy.

See page 39 for more information.



**Rosemary Agnew**

Scottish Public Services Ombudsman



# Overview

## The SPSO's Role and Function

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The Scottish Public Services Ombudsman (SPSO) has a wide remit, covering a variety of functions and services.

Her powers and duties come from the Scottish Public Services Ombudsman Act 2002 which gives her three distinct areas of statutory functions:

**1** the final stage for complaints about most devolved public services in Scotland including councils, the health service, prisons, water and sewerage providers, Scottish Government, universities and colleges

**2** specific powers and responsibilities to publish complaints handling procedures, and to monitor and support best practice in complaints handling

**3** Independent Review Service for the Scottish Welfare Fund with the power to overturn and substitute decisions made by councils on Community Care and Crisis Grant applications

# Performance Report

## Strategic Objective 1:

### To provide a high quality, user-focused independent complaints handling service

Here we highlight how we handle enquiries and complaints; the functions covering the majority of our work.

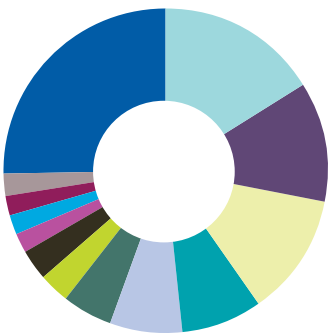
#### Enquiries received

We received 904 enquiries.



Enquiry type	No.	%
General enquiry	10	1%
Matter or organisation out of jurisdiction	534	59%
Complaint not made to the public body	360	40%
<b>Total</b>	<b>904</b>	<b>100%</b>

If we can't help, we signpost people to other organisations better placed to give assistance. We signposted 534 people to 37 different organisations. It is notable that 75% of those signposted were to just 12 (one third) of the total 37.



Signposted to	Number	% of signpost enquiries
Financial Ombudsman Service	85	16%
Ombudsman Services: Energy	66	12%
Citizens Advice Bureau	65	12%
Shelter Housing Advice Line	43	8%
Parliamentary and Health Service Ombudsman	36	7%
Ombudsman Services: Communications	28	5%
Consumer Direct	18	3%
Water Industry Commission for Scotland	17	3%
Referred to Employer / Human Resources	13	2%
Housing and Property Chamber	11	2%
Planning Aid for Scotland	11	2%
Information Commissioner Office – Scotland (DPA)	10	2%
All others	131	25%

# Performance Report

## Complaints received

The number of complaints received this year was broadly comparable with last year but our overall caseload was higher. 14.5% of our complaints caseload were cases carried forward from the previous year. Many of these were being held unallocated because we did not have the resources to look at them. Addressing this backlog of cases was a key priority for us.

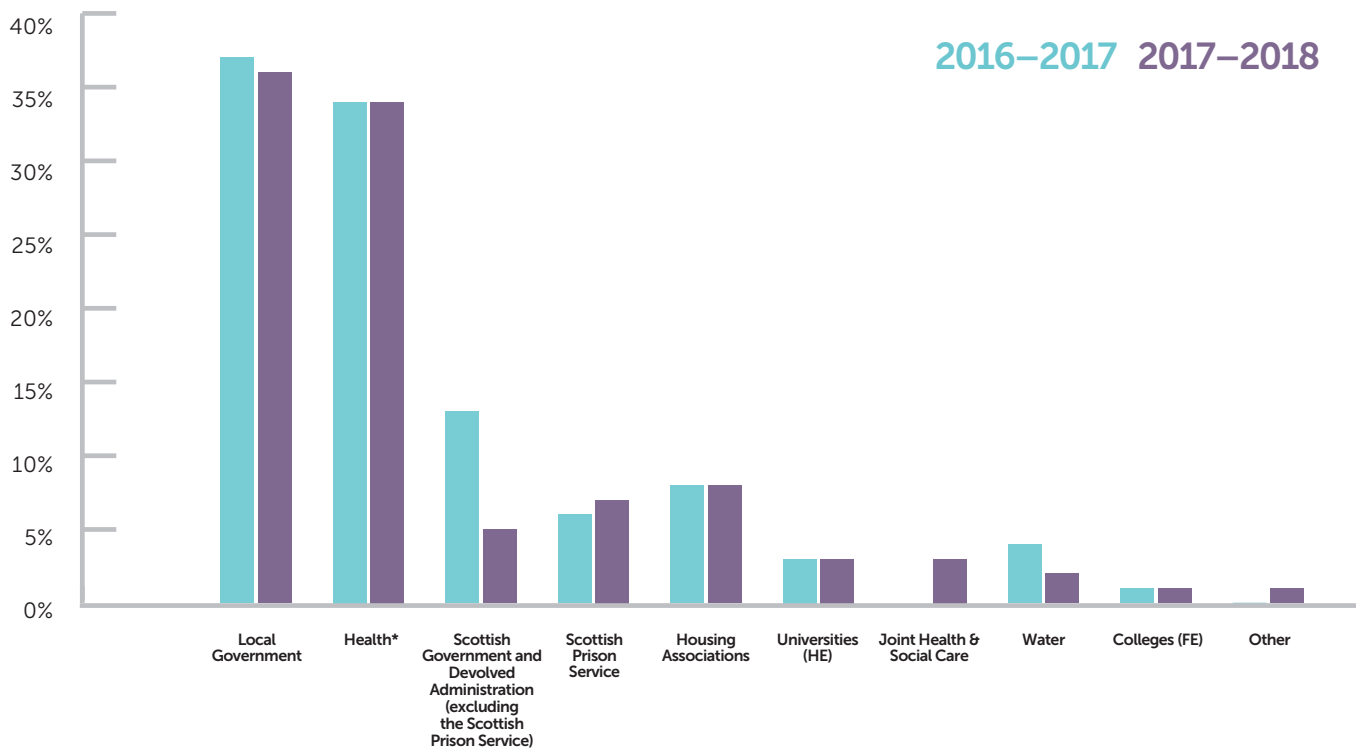
### Complaints received

	2017–18	2016–17
Complaints received	4,125	4,182
Carried forward from previous year	702	631
<b>Total caseload</b>	<b>4,827</b>	<b>4,813</b>

## Complaint subjects

The proportion of complaints received about each sector remained broadly the same as the previous two years with complaints about the health and local government sectors being 70% of our overall caseload.

### Complaints received by sector in 2017–18 and 2016–17



\* includes health complaints made by prisoners



# Performance Report

## How we handled complaints

### Overview of complaints handled

We handled 3% more complaints in 2017–18 than in 2016–17. This was achieved by temporarily diverting resources to casework in a planned effort to address our backlog of unallocated cases, and reduce the amount of time complainants had to wait before their case could be allocated (from 8–10 weeks at its peak down to 2 weeks). It meant we could not do other work we had planned, particularly in the area of communications and stakeholder engagement. For example, we only had minimal resources to raise awareness of the new Ombudsman’s appointment and of the excellent report we issued on *Making Complaints Work for Everyone* (more about that on page 36).

### Complaints overview

	2017–18	2016–17
<b>Total caseload</b>	<b>4,827</b>	<b>4,813</b>
Cases brought forward	702	631
Complaints received	4,125	4,182
<b>Total cases closed at assessment</b>	<b>3,492</b>	<b>3,299</b>
Out of jurisdiction	541	480
Premature	1,017	1,142
Not investigated further	1,934	1,677
<b>Total Cases closed after investigation</b>	<b>734</b>	<b>805</b>
Upheld in full	196	212
Upheld in part	219	205
Not upheld	291	361
Not duly made, or withdrawn	18	21
Resolved	10	6
<b>Total cases closed</b>	<b>4,226</b>	<b>4,104</b>
Cases carried forward	598 <sup>1</sup>	702

<sup>1</sup> The carried forward figure is run from our open figures on the first day of the year and the other figures in this table from our closed year-end figures. Changes happen constantly to our open figures as cases are received and determined every day and this is why the number is marginally different from what a simple calculation would predict (601).

# Performance Report

## Case outcomes

### Assessment

We try to provide answers as soon as we can on what action we can, and will, take on a complaint. We explain whether someone's case can be resolved, whether it is something that we can legally look into, and whether an SPSO investigation is beneficial to them. We call this assessment.

### Assessment outcomes 2017–18

Assessment outcome	Number of cases	
Not duly made or withdrawn	900	We cannot investigate something that does not meet the statutory definition of a complaint or is withdrawn.
Out of jurisdiction (discretionary)	201	Our governing legislation sets out what we can and cannot accept as a complaint. In some situations (such as a complaint being made late) we have discretion (that means some choice) to accept them anyway, but have decided not to.
Out of jurisdiction (non-discretionary)	340	There are some complaints that the law simply does not allow us to look into.
Outcome not achievable	208	We don't want to raise people's hopes unnecessarily so will not accept complaints where the outcome the complainant wants is not achievable by us.
Premature	1,017	Some cases are 'premature complaints'. These are cases that reach us too early, without having first completed the authority's complaints process. It is important that authorities are given the opportunity to address complaints first as it is to the complainant's advantage, and provides an opportunity for learning.
Proportionality	755	In some cases we conclude that the organisation complained about has already taken appropriate steps to address the problem and we cannot achieve any more for the complainant or the wider public interest. We call this a 'proportionality decision'. It is an approach that we have been developing and building on over the past two years. The aim is to provide a more realistic and efficient service for complainants.
Resolved	71	These are cases we did not investigate further as they were resolved to the satisfaction of both parties without the need for detailed investigation.
<b>Total</b>	<b>3,492</b>	

In addition to 1,017 premature cases, we also identified a further 179 cases where someone had originally brought their complaint to us and had to then bring it back again because they did not achieve a satisfactory outcome. This suggests that 1 in 7 people that approach us with a premature complaint are likely to return at a later stage (this is the same ratio as last year).

# Performance Report

**71** of the cases we did not investigate further were resolved to the satisfaction of both parties without the need for detailed investigation

## Investigations

In 2017–18, we completed 734 investigations compared to 804 in 2016–17. 23 of these were full public reports, compared to 21 in the previous year. Typically, public reports cover more serious complaints, often with wider significance to other organisations. They are more complex and more resource intensive. While the change is small, it is an indication that complaints are increasing in complexity and something we will continue to monitor. For cases where we did not publish a full report, we published a decision summary instead to ensure that learning was captured. All of our decisions can be found on our website.<sup>2</sup>

## Our investigation findings

When we publish our investigation findings, we report on whether we have upheld complaints we have considered. It is generally thought that a low uphold rate reflects good complaints handling by an authority but we question that.

Of the 734 complaints we investigated, we upheld or partly upheld 58.8% of complaints compared to 54% last year.<sup>3</sup> While we found evidence of complaints handling issues (more information on pages 20–21), we do not think the upheld rate is necessarily the result of poor complaints handling.

It is more likely that the increase in the uphold rate is as a result of our developing approach to considering, as early as possible, whether there is more we can achieve for complainants by investigating in detail. We look for evidence to demonstrate that an authority has handled a complaint appropriately and taken reasonable steps to resolve the matter before we move to investigation. We use independent specialist advisers as early as is practicable to inform our thinking. All of this means that the cases subject to detailed investigation are more likely to be ones upheld.

## Independent advice

We use independent professional advisers to inform our decision-making on some of our complaints: specifically in cases relating to health, social work, local authority planning, water services, equalities and environmental health. They provide expert advice on what is reasonable to expect in the particular circumstances of a case.

Cases can be complex, covering a range of specialist areas. This means we have to seek advice from a number of different professionals, with some cases requiring four or more pieces of specialist advice. This year 254 (38%) of cases needed multiple pieces of advice. This was an increase on the 184 last year, reflecting the increasing complexity of the cases progressing to investigation, particularly in relation to health complaints.

What this means in practice is that although the number of investigations fell slightly, the overall caseload is more challenging and requires significant resources.

<sup>2</sup> [www.spsa.org.uk/our-findings](http://www.spsa.org.uk/our-findings) – we do not publish our findings in a very small amount of cases where, due to the specific circumstances of the complaint, confidentiality may not be maintained when publishing

<sup>3</sup> This year we have calculated the 'uphold rate' using the number of complaints upheld or partly upheld as a percentage of complaints where we made a decision on the complaint, i.e. upheld, some upheld or not upheld. We feel that excluding withdrawn, resolved and otherwise incomplete investigations from this calculation gives a more accurate representation of the performance of organisations and allows them to benchmark more effectively. You will therefore find the figures for uphold rate this year do not directly compare with previous years.

# Performance Report

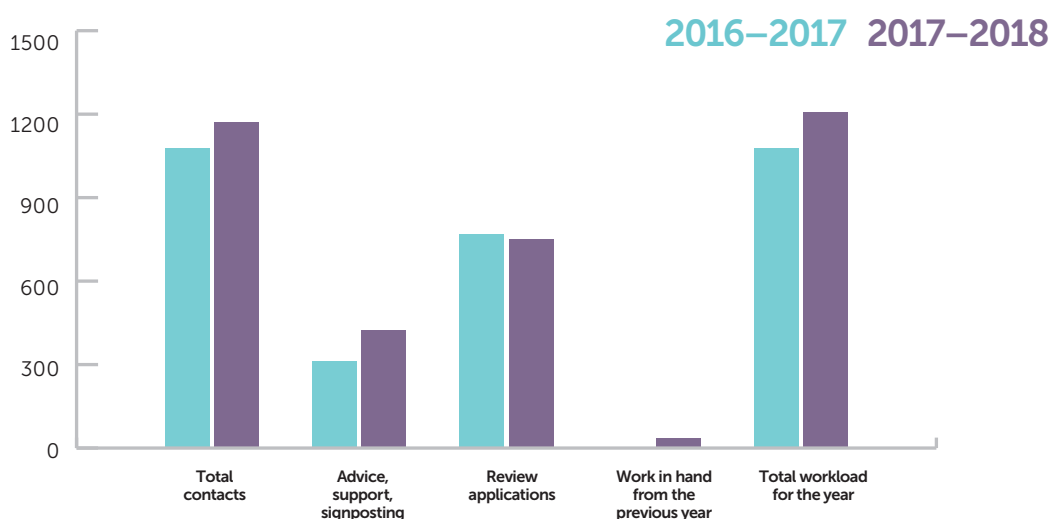
## Strategic Objective 2:

### To provide a high quality, user-focused independent review service for Scottish Welfare Fund independent review decisions

The Scottish Welfare Fund (SWF) independent review service has been part of SPSO since 2016–17. We carry out independent reviews of decisions councils make on Community Care and Crisis Grant applications. We issue a separate, more detailed annual report, specifically on the SWF independent review service. This is available on our website<sup>4</sup> and contains further information about our approach and findings.

#### SWF Applications to SPSO

##### Applications received



##### Applications handled



The number of cases closed at review increased by 38.7% from last year, and we had less work in hand at the end of the year. This is significant because we issue full decisions in cases closed at review, and these require considerably more resources than cases closed before review.

<sup>4</sup> [www.spsos.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18](http://www.spsos.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18)

# Performance Report

## Application outcomes

	2017–18	2016–17
Community Care Grants decision changed	164	98
Community Care Grants decision NOT changed	151	132
Crisis Grants decision changed	102	66
Crisis Grants decision NOT changed	186	141
Community Care Grant cases referred back to council to make new decision	3	0

Although we closed 606 review applications, we only count the ones where we made a determination as a 'decision'. In addition to the figures above, in 5 cases (3 CG and 2 CCG) applications were withdrawn by the applicant.

As you can see, over half of CCG decisions were changed, an increase of 9% on the previous year. In contrast, although CG numbers were up by 45, the proportion we changed was relatively stable at 35%.

Community Care grants	2017–18	2016–17
Decision changed	52%	43%
Decision NOT changed	48%	57%

Crisis grants	2017–18	2016–17
Decision changed	35%	32%
Decision NOT changed	65%	68%

## Access to our SWF service

We never stop looking for ways to make our service as accessible as possible. We listen to feedback and take active steps to find ways to be more accessible, especially recognising that applicants who come to us are often vulnerable and in crisis situations.

Our diversity information from a 20% sample of SWF casework, showed 57% of people reported a mental or physical disability. This is significantly higher than the Scottish Health Survey (2008–2016) which reported that 33% of adults have long-term limiting health condition or disability.<sup>5</sup>

We take applications in a variety of ways. At 69% of applications, by far the most well used route to making a review request is through our Freephone number. We consider this ability to take applications verbally as critical to the accessibility of our service.

Going forward we will be considering how we make our service accessible to British Sign Language (BSL) users as part of the SPSO's BSL Action Plan.

<sup>5</sup> [www.gov.scot/Topics/People/Equality/Equalities/DataGrid/Disability](http://www.gov.scot/Topics/People/Equality/Equalities/DataGrid/Disability)

# Performance Report

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## SWF Quality Assurance

To ensure that we persistently maintain the quality and continuous improvement in our decision-making and our service delivery, we invest in working with our various stakeholders to gather their views and review any complaints about our work.

## SWF Stakeholder engagement

Highlights include:

- We held our first SWF engagement event in February 2018 attended by 61 delegates who have an interest in SWF, including local authority staff and third sector representatives.
- We hosted quarterly sounding boards for members of local authorities and the third sector where we were able to share our findings, discuss complex queries and gather feedback about our service.
- We jointly delivered workshops for decision-makers in Edinburgh, Glasgow and Dundee with the Scottish Government in November 2017 focusing on how councils might ensure that their decision letters contain the necessary information for applicants to understand the reasons for their decision.
- We asked the Scottish Government to make a change to the Statutory Guidance to require that decision letters to applicants have sufficient information. This was implemented in February 2018.

More information is available in our SWF Annual Report.<sup>6</sup>



<sup>6</sup> [www.spsa.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18](http://www.spsa.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18)

# Performance Report

## Strategic Objective 3:

### To simplify the design and operation of the complaints handling system in Scottish public services

A key finding of the 2007 Crerar review<sup>7</sup> was that complaints processes in Scotland's public services were not fit for purpose. They were not always accessible or easy to use and were often complex and far too variable in their content.

The *Fit-for-purpose Complaints System Action Group* (FCSAG) considered how to improve the complaints handling system in Scotland, taking account of the recommendations made in the Crerar review. In its 2008 report to Ministers<sup>8</sup> FCSAG supported the value of simplification both for consumers and for service providers, and a stronger ethos across our public services to view complaints as opportunities for learning which empowers complaints handlers to resolve as many complaints as possible at the first level. The recommendations in this report informed our strategic objective to ***simplify the design and operation of the complaints handling system in Scottish public services***.

Since the introduction of the Complaints Standards Authority (CSA) in 2010, we have worked across the public sector in Scotland to simplify and standardise complaints handling procedures in each sector. This year was significant as, from April 2017, the NHS Scotland model Complaints Handling Procedure (CHP) and the Social Work model CHP became operational.

Model complaints handling procedures make it simpler for service users to complain, build staff and user confidence in complaints handling and encourage organisations to identify and make best use of lessons learned from complaints

#### Developing NHS and Social Work model CHPs

The introduction of these new CHPs brings NHS and social work complaints handling into line with other Scottish public service sectors, enabling a standardised and consistent approach to complaints handling.

The NHS Scotland model CHP applies to all NHS bodies, boards and primary care service providers (including external providers or contractors who deliver NHS services).

The social work model CHP applies to all social work services retained by councils and to social work services delivered by Health and Social Care Partnerships (HSCP) under delegated arrangements (including external contractors who deliver social work services on behalf of a council or HSCP).

Integration Joint Boards (IJBs) must also have a complaints handling procedure which complies with the principles approved by the Scottish Parliament in January 2011. To support IJBs, we developed a model CHP template during 2017–18. When this is adopted in full by IJBs, they will be compliant.

<sup>7</sup> Report of the Independent Review of Regulation, Audit, Inspection and Complaints Handling of Public Services in Scotland: [www.gov.scot/Publications/2007/09/25120506/0](http://www.gov.scot/Publications/2007/09/25120506/0)

<sup>8</sup> The Fit-for-purpose Complaints System Action Group (FCSAG) report to Ministers:

[www.webarchive.org.uk/wayback/archive/20180705152547/http://www.gov.scot/Topics/Government/PublicServiceReform/IndependentReviewofReg/ActionGroups/ReporttoMinisters](http://www.webarchive.org.uk/wayback/archive/20180705152547/http://www.gov.scot/Topics/Government/PublicServiceReform/IndependentReviewofReg/ActionGroups/ReporttoMinisters)

# Performance Report

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## Monitoring compliance and giving advice

Having previously worked in partnership with sector stakeholders and others to develop these new model CHPs, the main focus of our CSA activities during 2017–2018 was to ensure compliance with the model procedures, and to provide advice, guidance and support to facilitate successful implementation in each sector.

### We carried out 87 compliance checks:

- 30 for Integration Joint Boards
- 35 for Social Work CHPs (HSCPs and councils)
- 22 for NHS health boards (14 territorial, 7 special NHS Boards and 1 public health body)

Our initial compliance checks tested whether each NHS Board, council, HSCP and IJB had properly adopted and implemented the model CHP. This entailed assessing organisations' CHPs against a statement of compliance and a self-assessment. If an organisation was not fully compliant, we worked closely with them to ensure corrective action was taken.

## Raising awareness

We also worked closely with the sectors throughout the year to raise awareness and support implementation of the new CHPs. This included:

- attending the social work complaints sub-group and the NHS Complaints Personnel Association Scotland network meetings, where we communicated the requirements of each model and responded to procedural and governance questions in relation to key complaints indicators and complaints handling performance
- supporting HSCPs throughout the year. For example we developed a new training course, aimed specifically at staff in HSCPs. We delivered it for the first time in October 2017. Participants particularly welcomed the case study approach together with the tips and tools for effective complaints investigations, which are key elements of the course. Feedback included:

I felt the facilitators were extremely engaging, informative and interesting and it was evident that they were very experienced in this field of work

It was excellent to learn about the role of the SPSO and it has helped me in my role in dealing with complaints

Really appreciated the practical rather than theoretical approach to the course & the perspective of what you need to do/look out for as a busy operational manager



# Performance Report

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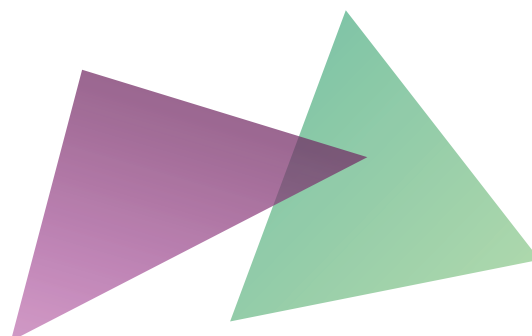
- facilitating a workshop in May 2017 on the procedure at the Scottish Practice Management Development Network Annual Conference in Edinburgh. This was to publicise the new NHS Scotland CHP
- working with the Medical and Dental Defence Union of Scotland in December 2017 to deliver a staff awareness session on the new procedure
- attending and presenting on the CHP to joint Patient Advice and Support Service and NHS Complaints Personnel Association Scotland events in Dundee and Glasgow
- delivering NHS complaints workshops in partnership with NHS Education for Scotland at four regional events (Supporting Feedback and Complaints and Duty of Candour incidents across Health and Social Care) in 2018.

## What next for CSA?

Scotland has come a long way since the findings of the Crerar review. This has only been achieved through a partnership approach. Collaborative working has delivered the vision of a simplified and standardised complaints procedure which prioritises the early resolution of complaints, and places great emphasis on learning from complaints to drive up standards of service delivery.

The next stage of our work involves reviewing and analysing the effectiveness of the model CHPs to assess how they can be improved to deliver even greater consistency and value. Work on this will commence during 2018–2019.

- March and April 2012 we published the first CHPs for the local government and housing sectors
- October 2016 the Scottish Government published the NHS Scotland model CHP (operational from April 2017)
- December 2016 we published the Social Work Model CHP (operational from April 2017)
- There is now a model CHP in place across each of the main public sector organisations in Scotland



# Performance Report

## Strategic Objective 4:

### To improve complaints handling by public service providers

Key to improving complaints handling by public service providers across Scotland is the work we do to support public bodies to identify and share good practice in complaints handling. We perform these duties in a range of different ways, including:

- providing expertise and assistance about complaints procedures and developing a valuing complaints culture
- speaking to staff and management teams in regards to good complaints handling and governance requirements
- supporting sector networks of complaints handlers to share good practice and learn from each other
- developing resources to help organisations manage and learn from complaints.

#### Learning from SPSO complaints

We are developing a structured approach to gathering and analysing what we learn about public authorities' complaint handling to inform the feedback, training and support we give. We do this in a variety of ways highlighted below.

#### Monitoring uphold rates

##### Uphold rates by sector-by-sector 2017–18 and 2016–17

Sector	2017–18	2016–17	% difference
Local Government	58%	61%	-3%
Health	60%	53%	+7%
Scottish Government and devolved administration	52%	47%	+5%
Housing associations	57%	41%	+16%
Water	73%	71%	+2%
Further education	58%	60%	-2%
Higher education	45%	41%	+4%

The local government uphold rate fell slightly compared to 2016–17 from 61% to 58%. The uphold rate for health complaints rose from 53% to 60%. We are keen to understand why and so monitor our own complaint information and actively engage with stakeholders.

# Performance Report

## Complaint Handling Marker

When we investigate complaints, our Complaints Reviewers also look at how the complaint was handled by the body. Where they identify that a complaint was not handled fully in line with the requirements of the model CHP, it is recorded. Through our work on standards, we analyse this data to help bodies improve their complaints handling performance.

During 2017–18 we found that just over 22% of the cases we closed included one or more complaints handling failings. It is worth noting that, in many cases, authorities identified failings themselves, prior to receiving feedback from us.

There are three key areas where bodies are likely to fail to meet the requirements of the model CHP. These are:

- 1 the requirement to identify fully each issue being complained about and to provide an accurate, proportionate and evidence-based decision for each complaint
- 2 the requirement to communicate clearly with the person making the complaint and to manage their expectations in respect of the complaints process and likely outcomes
- 3 the requirement in respect of timescales at stage 2 of the model CHP, and to keep the person making the complaint updated where the timescales will not be met.

This information will inform the support we give authorities and future development of the CHP.

## Monitoring premature complaints

In 2017–18, the proportion of SPSO's overall complaint caseload that was 'premature' (i.e. the complaint had not completed the public body's complaint handling process) was 24.1%. This was a 4% reduction on the year before and a 6% reduction since 2015–16 when the rate was 31%. As the table below shows, there is still variation between sectors.

### Premature complaints per sector 2017–18

Sector	2017–18	2016–17	% difference
Colleges (FE)	13.3%	26.5%	-13%
Universities (HE)	10.6%	13.9%	-3%
Health	21.6%	20.7%	1%
Housing Associations	30.6%	34.8%	-4%
Joint Health & Social Care	13.8%	-	-
Local Government	28.1%	35.7%	-8%
Scottish Government and Devolved Administration	19.3%	19.6%	0%
Water	38.9%	40.8%	-2%
<b>Total</b>	<b>24.1%</b>	<b>27.8%</b>	<b>-4%</b>

A low rate of premature cases rate can be an indication of a successful complaints process that is founded on early resolution, and an indicator of successful implementation of the model CHP process. We continue to monitor this.

# Performance Report

## Monitoring recommendations

We follow up each recommendation, requiring the authority to provide detailed evidence of what they have done to provide redress or make the improvement we asked for. We set a deadline on each recommendation and follow this up. 94% of the recommendations we made were completed within three months of the target date set. Ultimately, it is down to organisations to implement the recommendations on time.

This approach enables us to capture and better understand information about our findings and recommendations, which in turn help us to better understand the impact of our work.

Our recommendations have three main purposes:

- **redress individual injustice**
- **learning and improvement to help prevent the problem from happening again**
- **improve complaints handling**

In 2017–18 we made 1,192 recommendations, a slight reduction from the 1,379 recommendations we made in 2016–17. This reflects a changed approach to making recommendations where we only recommend that an organisation takes action where they had not already planned to do so. Where the organisation has already planned remedial activities, we do not make a recommendation, but we do ask for evidence that the action has been taken. Of the 1,192 recommendations we made:

- 448 recommendations to provide individual remedy for an aggrieved person, of which:
  - 379 required a meaningful apology to be provided
  - 17 required a financial payment to be made
  - 52 were for other forms of remedy
- 635 recommendations were in respect of learning and improvement actions
- 109 recommendations to improve complaints handling performance.

## Breakdown of recommendation types



Recommendation type	No.	%
Individual redress	448	38%
Learning and improvement	635	53%
Improve complaints handling	109	9%

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## Detailed breakdown of recommendations by type and sector

Recommendations 2017–18	Individual remedy – apology	Individual remedy – financial payment	Individual remedy – other	Complaints handling remedy	Learning and Improvement remedy	Total
Colleges	6	1	1	7	6	<b>21</b>
Health	254	5	8	50	499	<b>16</b>
Housing associations	7	2	0	3	7	<b>19</b>
Joint Health and Social Care	3	0	0	1	10	<b>14</b>
Local Government	80	5	29	30	78	<b>222</b>
Scottish Government and Devolved Administration	13	2	4	9	14	<b>42</b>
Universities	10	1	6	5	14	<b>36</b>
Water	6	1	4	4	7	<b>22</b>
<b>Total</b>	<b>379</b>	<b>17</b>	<b>52</b>	<b>109</b>	<b>635</b>	<b>1,192</b>

## Feedback to public bodies

In addition to making recommendations, we provide feedback to authorities. This happens where we have identified an issue which may not be specifically in relation to the complaint we have been asked to investigate, or it may not be appropriate to make a recommendation to address the issue. During the year we provided feedback on 348 issues to authorities. This included:



Feedback on 'other issues' typically draws the authority's attention to relevant comments from one of our independent professional advisers.

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## Complaints handling guidance

A core activity of our CSA work is to assist public bodies in good complaints handling by providing advice, guidance and support and in responding to ad-hoc requests for help. In 2017–18, we responded to 274 of these requests (370 in 2016–17). The majority of requests we received were from the local government and health sectors, generating 20% and 18% of all contacts respectively. This activity reflects our continued focus of supporting the implementation of the two new CHPs. The requests we received ranged from general enquiries to requests for SPSO tools and resources and input and guidance about complaints handling issues.

The reduction in the volume of requests we received from the previous year was expected. This is a continuing trend which reflects our work to create and participate in knowledge networks across all sectors to identify and share good practice in complaints handling.

## Stakeholder engagement

### External engagements

One of our main activities this year involved providing support and advice through external engagements. During 2017–18 we participated in 66 meetings or events with external bodies. This activity level is broadly similar to our work in 2016–17, when we were involved in around 70 such events. These activities are wide ranging, from providing the keynote speaker and facilitating a good practice workshop at the *'Improving Complaints Handling: Putting People at the Centre of Services'* conference, to speaking to NHS stakeholders in Wales (supporting the Public Services Ombudsman for Wales), or meeting with individual organisations across Scotland to support the effective management of complaints.

As we did in previous years, we have worked in partnership with NHS Education for Scotland, the Scottish Government, the Scottish Social Services Council, the Care Inspectorate and Healthcare Improvement Scotland to support complaints handling across health and social care. Through four national conferences for all relevant health and social care staff, including independent contractors and care providers, (*Supporting Feedback and Complaints and Duty of Candour Incidents Across Health and Social Care*) we ran workshops to provide staff with the skills, knowledge and confidence to handle and manage complaints.

### Networks

Supporting sector complaints networks continues to be an important aspect of our work. These networks are run by each sector with the aim of identifying, evaluating and sharing good practice in complaints handling. As integral members of each network, we value the opportunity this gives us to feedback on complaints issues from an SPSO perspective, and to contribute to the work of each network. Throughout 2017–18 we participated in the local government, housing, NHS, college and university sectors complaints networks. We are also a member of the local government benchmarking sub-group and have attended the Social Work complaints sub-group.

Each network works in its own way. The common objective they all share, however, is to learn from complaints and drive up the standards of complaints handling performance. They achieve this in various ways, for example, by analysing complaints performance information to learn, improve and benchmark performance, or hosting an annual complaints conference or working to develop good practice resources.

To demonstrate her support of the networks and recognition of the value they add, during 2017–18 the Ombudsman attended network events for the college, housing and local government sectors. She intends to follow this up in the next year by attending networks she has not yet had the opportunity to meet.

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## Training

Our training unit comprises one part-time training co-ordinator with some administration support. We delivered 43 training courses across all sectors, these were:



For more information about the training we offer, please visit our website.<sup>9</sup>

## Consultation and Parliament

The Ombudsman appeared before three separate Scottish parliamentary committees.

- At the Health and Sport Committee she gave evidence as part of their inquiry into clinical governance emphasising the importance of a culture of learning from and valuing improvement.<sup>10</sup>
- At the Local Government and Communities Committee, she gave evidence about our performance for 16/17. This included a discussion of possible improvements to our legislation.<sup>11</sup>
- At the Social Security Committee, she gave evidence about the role of complaints in relation to the new Social Security agency and a proposed charter.<sup>12</sup>

She also appeared before the Local Government and Communities Committee of the National Assembly for Wales which is considering new legislation for the Public Services Ombudsman for Wales.<sup>13</sup>

<sup>9</sup> [www.valuingcomplaints.org.uk/training/training-courses](http://www.valuingcomplaints.org.uk/training/training-courses)

<sup>10</sup> [www.parliament.scot/parliamentarybusiness/report.aspx?r=11232](http://www.parliament.scot/parliamentarybusiness/report.aspx?r=11232)  
We also submitted written evidence in advance of the meeting which can be found here:  
[www.spsa.org.uk/sites/spsa/files/consultations-and-inquiries/2017/SPSO%20Response%20to%20H%26S%20committee%20inquiry%20on%20NHS%20Governance.pdf](http://www.spsa.org.uk/sites/spsa/files/consultations-and-inquiries/2017/SPSO%20Response%20to%20H%26S%20committee%20inquiry%20on%20NHS%20Governance.pdf)

<sup>11</sup> [www.parliament.scot/parliamentarybusiness/report.aspx?r=11346](http://www.parliament.scot/parliamentarybusiness/report.aspx?r=11346). We also submitted written evidence in advance of the meeting which can be found here:  
[www.spsa.org.uk/sites/spsa/files/consultations-and-inquiries/2018/180124SPSOwrittensubmission.pdf](http://www.spsa.org.uk/sites/spsa/files/consultations-and-inquiries/2018/180124SPSOwrittensubmission.pdf)

<sup>12</sup> [www.parliament.scot/parliamentarybusiness/report.aspx?r=11328](http://www.parliament.scot/parliamentarybusiness/report.aspx?r=11328)

<sup>13</sup> [www.senedd.assembly.wales/ieListDocuments.aspx?CId=447&MID=4406](http://www.senedd.assembly.wales/ieListDocuments.aspx?CId=447&MID=4406)



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We responded to consultations including:

- On the Planning (Scotland) Bill we highlighted the frustration that people can feel when they are unable to question professional judgement in relation to planning decisions.<sup>14</sup>
- On the Education (Scotland) Bill we asked for reassurance that any changes were undertaken in a way that did not reduce people's right to complain and asked whether the right to complain to us should be extended to all publicly-funded schools.<sup>15</sup>
- On the Children and Young People (Information Sharing) (Scotland) Bill we provided a briefing note about our concerns about a possible duplication in complaint provisions.<sup>16</sup>

Thank you for giving evidence to the Committee on 31 January and for contributing to an interesting and informative session. It was helpful for the Committee to hear your views on the future strategic direction of the SPSO which the Committee is supportive of.<sup>17</sup>

The evidence we heard from the Scottish Public Services Ombudsman and the Northern Ireland Public Services Ombudsman on the complaints handling proposals was compelling. We would like to see the Ombudsman following the model that has been successful in Scotland, ensuring collaborative working and consultation with the sector.<sup>18</sup>

<sup>14</sup> [www.spsso.org.uk/sites/spsso/files/consultations-and-inquiries/2018/180202PlanningBillconsultation.pdf](http://www.spsso.org.uk/sites/spsso/files/consultations-and-inquiries/2018/180202PlanningBillconsultation.pdf)

<sup>15</sup> [www.spsso.org.uk/sites/spsso/files/consultations-and-inquiries/2018/180129SPSOEducationconsultation%20%282%29.pdf](http://www.spsso.org.uk/sites/spsso/files/consultations-and-inquiries/2018/180129SPSOEducationconsultation%20%282%29.pdf)

<sup>16</sup> [www.parliament.scot/S5\\_Education/Inquiries/20170824SPSO\\_leter\\_and\\_Briefing\\_note.pdf](http://www.parliament.scot/S5_Education/Inquiries/20170824SPSO_leter_and_Briefing_note.pdf)

<sup>17</sup> from Convener of Local Government and Communities Committee:  
[www.parliament.scot/S5\\_Local\\_Gov/General%20Documents/20180207\\_ConvenerToSPSO.pdf](http://www.parliament.scot/S5_Local_Gov/General%20Documents/20180207_ConvenerToSPSO.pdf)

<sup>18</sup> from the Stage 1 report on the Public Services Ombudsman (Wales) Bill [www.assembly.wales/laid%20documents/cr-ld11459/cr-ld11459-e.pdf](http://www.assembly.wales/laid%20documents/cr-ld11459/cr-ld11459-e.pdf)



# Performance Report

## Strategic Objective 5: To be an accountable, best value organisation

The SPSO 2017–18 business plan<sup>19</sup> sets out our key performance indicators and performance measures. We track performance throughout the year, reporting performance publicly quarterly. We also actively monitor risk, which is covered in more detail in our Accountability Report.<sup>20</sup>

### Strategic and business planning

We laid a new strategic plan before Parliament in February 2018. This set out the revised vision strategic aims we will work to from April 2018.<sup>21</sup>

The strategic plan, “Putting People at the Heart of Public Services” formed the basis of our 2018–19 business plan. The business plan, which was created with input from the whole team, will be updated and re-published quarterly. For the first time, we have captured, by team, both the project work we do, and our business as usual. This demonstrates the scale, range and volume of our work.

As part of this work, we confirmed our values.



### SPSO Values

- We will work **independently** and **fairly**
- We are **people-focused** and value **integrity** and **respect**
- We **value learning** and **improvement**

### Community, social and human rights

We think it important to contribute to the society and communities in which we live and work.

Not only do we build human rights into our approach, we actively encourage staff to undertake public and voluntary duties (recognising that we must avoid conflicts of interest). Staff are involved in a range of activities which we support either as an office or individually. These range from sitting on the boards of charities – through to gathering women’s clothing to support unemployed women to get into work /back into work – to sponsored events and challenges.

<sup>19</sup> [www.spsso.org.uk/business-plans](http://www.spsso.org.uk/business-plans)

<sup>20</sup> [www.spsso.org.uk/finance](http://www.spsso.org.uk/finance)

<sup>21</sup> [www.spsso.org.uk/strategic-plan](http://www.spsso.org.uk/strategic-plan)

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We also organise and participate in office-based events. Highlights were:

- We raised £235 for the STV children's appeal at the delicious big breakfast event organised and prepared by our SWF team.
- We held an event for International Women's Day, where we learned about women's (and men's) challenges in the workplace. We had excellent presentations from our own colleagues, Girlguiding Scotland and Anna Poole QC. Many of us made and tweeted our pledges to press forward and progress gender parity.
- We had great fun at our Christmas lunch, but with a serious edge. During an exceptionally cold December, we gathered and donated 45 coats and two large bags of gilets, hats, scarves and gloves, donated £100 worth of H+M vouchers and raised £360. Guests of honour were representatives of Edinburgh Young Carers (one of our staff sits on their Board).
- We made personal pledges to support climate change week. These were very varied and included, for example: cycling to work, being more thoughtful about what we print, cutting down on packaging waste by using re-usable wraps rather than plastic bags, switching off electrical items and recycling more.

## Casework performance

### Timescales

We publish performance indicators (PI) for both our complaints handling and our Scottish Welfare Fund review casework.

#### Complaints handling timescales <sup>22</sup>

	<i>Complaints handling targets</i>	2017–18	2016–17
PI-1 Complaints	95% of advice stage complaints were handled <b>within 10 working days</b>	<b>99.5%</b>	99.5%
PI-2 complaints	95% of early resolution complaints were decided or moved to more complex investigation stage <b>within 70 working days</b>	<b>85.3%</b>	88.0%
PI-3 Complaints	95% of investigation complaints were decided <b>within 260 working days</b>	<b>97.1%</b>	96.1%

<sup>22</sup> Complaints handling indicators measure the time it takes us to close a case from the point of receipt of the case.

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We recognise how important it is to respond to complaints in good time. Making, or being subject to a complaint, can be stressful for everyone concerned. We try to balance the time we take, with ensuring we deliver quality investigations with robust decisions.

As you can see, we exceeded our targets, and matched or improved performance in relation to PI-1 and PI-3.

We did not achieve our PI-2 target as a consequence of focusing on addressing our backlog of unallocated cases. We recognised that addressing the backlog would impact the PI-2 timescales because we would be deciding cases that were, in some cases, already 10 weeks old before detailed work started on them (they had been triaged to make sure we did not delay on time-critical complaints).

It took a whole office effort to address the backlog, with support and involvement from every part of the office.

## Thank you!

- to everyone in my office for clearing our backlog of cases: to those who worked extra hours, took on temporary new duties, took on extra cases and supported colleagues
- to complainants and public bodies for your patience



## Scottish Welfare Fund reviews timescales

It is important to make decisions quickly as many applicants are in urgent need. As can be seen, we exceeded all of our targets by a significant margin. More information about our SWF work is available in our Annual Report on the Independent SWF Review service.<sup>23</sup>

Indicator	Target	Achieved 2017–18	Achieved 2016–17
PI-1 crisis grant applications determined within 1 working day	95%	99.3%	99.5%
PI-2 community care grant applications responded to within 21 working days	95%	99.4%	97.8%
PI-3 cases requested for reconsideration, decision is correct	95%	99.8%	94.6%

<sup>23</sup> [www.spsos.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18](http://www.spsos.org.uk/news-and-media/scottish-welfare-fund-independent-review-service-annual-report-2017-18)

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We count the working days from the point we have all the information we need to make a robust decision. PI-1 and PI-2 were agreed with the Scottish Government. PI-3 is a voluntary quality indicator we set for ourselves.

In addition to measuring and monitoring SWF reviews performance against targets, we also measure and monitor average case handling times. This includes the time taken for councils to provide us with information and time for enquiries with applicants and other third parties.



We allow councils one day to provide us with information about Crisis Grants and four days for Community Care Grants.

## Service standards

### Customer service standards

Our customer service standards<sup>24</sup> apply to the service we deliver to both members of the public and public authorities. They are a set of commitments about our communication, our openness and fairness, and our competence and responsibility. We issued a single report<sup>25</sup> which drew on all the feedback we received to give an informed, holistic, overview of our customer service.

We gather information about our service from a variety of sources, highlighted below.

### Customer feedback

In 2017–18 we sought feedback from service users in a range of ways, from electronic surveying of service users receiving complaint investigation decisions to telephone surveying of SWF service users. This feedback was used to inform and develop our service and reported in our service standards report.

<sup>24</sup> [www.spsso.org.uk/customer-service-standards](http://www.spsso.org.uk/customer-service-standards)

<sup>25</sup> [www.spsso.org.uk/service-standards-reports](http://www.spsso.org.uk/service-standards-reports)

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## Quality Assurance

We are committed to delivering quality in all of our casework. As well as ensuring that all live cases have an appropriate and proportionate level of operational management supervision, we also separately carry out quality assurance checks through the year on our complaints, SWF work and on the professional advice that we receive from our range of advisers. This work is carried out by the corporate services team, a team separate to the case handling teams, through our Quality Assurance (QA) process.

Our published performance indicator for this area of work is the number of complaint decisions that are changed as a result of QA in 2017–18. In the cases QA'd we found:

- decisions were correct in 100% of complaints QA'd
- decisions were correct in 100% of SWF cases reviewed.

We strive for excellence which means we actively look for ways to improve. QA identified a number of areas requiring improvement in a small number of cases. These included reducing unavoidable delays in case handling and improving the quality of the explanation given for our decisions.

We also highlighted examples of good practice. These included effective positive actions taken in identifying and managing accessibility issues for service users.

All QA findings were fed back to individuals, teams and managers to share learning, and improvements were implemented where needed.

## Complaint reviews

The Ombudsman normally responds to review requests personally (except if there is a conflict of interest). She is supported in this by Executive Casework Officers, not involved in the original decision.

We received significantly fewer review requests in 2017–18 than in the previous year resulting in us reviewing 10% of our decisions. Although we were close to our target, we revised three more decisions than in the previous year.

None of the cases raised serious or significant concerns, but as with quality assurance learning was taken from them and shared.

Indicator	Target	Achieved 2017–18	Achieved 2016–17
PI-5 Complaints	95% of cases requested for review, decision is correct	94.8%	97.1%

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## Requests for reviews of complaints decisions: volumes and outcomes

Review outcome	2017–18	2016–17
Case reopened, original decision revised	12	9
Case reopened in light of new information	7	6
Decision stands	206	261
Request for review is ineligible / withdrawn	5	33
<b>Total number considered</b>	<b>230</b>	<b>309</b>
% Correct Decision	94.8%	97.1%

### 126 cases originally decided before detailed investigation

- Of these, 4 were re-opened because we considered we should have exercised our discretion to investigate the complaint

### 103 cases originally decided following investigation

- Of these, 8 were reopened to change to the original decision

## SWF reconsiderations

Councils and applicants can ask us to review and reconsider SWF review decisions. We are not required to do this, but we introduced it as a voluntary stage as a quality measure and we use reconsiderations as an opportunity to learn and improve our service where we can. Someone not involved in the original decision carries out the review.

### 2017–18

No. requests received	% of all decisions made	Decision changed: <i>new information received</i>		Decision changed: <i>reviewer disagreed with original decision</i>		SPSO decision NOT changed	
		Number	% of all requests	Number	% of all requests	Number	% of all requests
21	3.5%	6	28.6%	1	4.8%	14	66.7%

### 2016–17

No. requests received	% of all decisions made	Decision changed: <i>new information received</i>		Decision changed: <i>reviewer disagreed with original decision</i>		SPSO decision NOT changed	
		Number	% of all requests	Number	% of all requests	Number	% of all requests
37	8.5%	2	5.4%	2	5.4%	33	89.2%

As you can see, reconsideration requests fell significantly compared to the previous year. We attribute this largely to how we communicate to manage expectations more effectively. We explain at the outset what our uphold rates are and explain our decisions over the phone. There was an increase in the proportion of cases changed at the reconsideration stage. However, this was due to a rise in the number of cases where new information was received during the reconsideration process which was material to the decision. The proportion of cases where the reviewer disagreed with the original decision remained stable.

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## Complaints about SPSO

We have a two-stage complaints process based on our customer service standards<sup>26</sup>, which adopts the principles and approach of the model complaints handling procedure.

### Stage 1: we try to resolve matters

### Stage 2: senior management investigate and respond formally

In line with the requirements we place on public bodies, details of all customer service complaints in 2017/18 were recorded and reported on a quarterly basis. A summary of the outcome of complaints received and responded to during the year was published on our web site on a quarterly basis. These reports provide information on our performance in handling customer service complaints in line with SPSO's Customer Service Complaints Handling Procedure.

## Summary of complaints outcomes and service failures 2017/18

### Breakdown of complaints received and closed

Summary	Received	Closed
Stage 1 – Frontline resolution	42	42
Stage 2 – Investigation	15	16
Escalated complaints (escalated from stage 1 to stage 2)	14	13
<b>Total</b>	<b>71</b>	<b>71</b>

### Breakdown of complaints upheld and not upheld

Summary	Upheld	Not Upheld	Total	% upheld
Stage 1 – Frontline resolution	6	36	42	14%
Stage 2 – Investigation	4	12	16	25%
Escalated complaints	7	6	13	54%
<b>Total</b>	<b>17</b>	<b>54</b>	<b>71</b>	

<sup>26</sup> [www.spsa.org.uk/customer-service-standards](http://www.spsa.org.uk/customer-service-standards)

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## Timescales

The target timescales to close complaints are:

- 5 working days at stage 1
- 20 working days at stage 2
- 20 working days for escalated complaints

### Further information about our performance in relation to timescales

Timescales	Met timescale (cases)	Did not meet timescale	Total number of working days	Average time in working days to close
Stage 1 Frontline resolution	29	11	169	4.2
Stage 2 Investigation	12	4	362	22.6
Escalated Complaints	11	2	221	17
<b>Total</b>	<b>52</b>	<b>17</b>	<b>N/A</b>	<b>N/A</b>

## Key points

- We received 71 service complaints in 2017/18. This is a notable increase from the previous year (2016/17) when we received 49 service complaints.
- We closed 71 service complaints in the year 2017/18. In the previous year (2016/17) we closed 50 service complaints.
- We closed 42 service complaints at Stage 1 (59% of all complaints received) and we closed 29 complaints (including 13 that were escalated from stage 1 to stage 2) at stage 2. This represented 41% of all complaints received.
- We upheld a total of 17 complaints. Six at stage 1 (14% of all stage 1 complaints), four at stage 2 (25% of all stage 2 complaints). Seven complaints were upheld after escalation (54% of escalated complaints).
- During the year the Independent Complaint Resolution Service (ICRS) received 14 referrals and completed 2 full investigations and 2 short reviews. They did not uphold any complaints. We signpost people to the ICRS if they remain dissatisfied with the way we have handled a customer service complaint.
- Average timescales at stage 1 were 4.2 working days (against a target of 5 working days), at stage 2 we took on average 22.6 working days (against a target of 20 working days), and for escalated complaints the average time to issue a decision was 17 working days (against a target of 20 working days).



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## Learning from complaints

We are committed to improving our service as a result of learning from customer service complaints. In addition to putting things right for our customer, where possible, when our service has not met our service standards, we always seek to learn the lessons from any service failures and address any systemic issues that may be identified. In the course of reviewing customer service complaints, individual instances of service failure are highlighted to the Leadership Team, where necessary, and to the relevant staff and managers involved where appropriate.

The two main areas of poor service provision identified throughout the year related to communications and delays. In each case we apologised for the failing. Staff were reminded of the service standards. We will take account of the findings in respect of communications in a planned update of the SPSO communications strategy.

If someone remains dissatisfied we signpost them to the ICRS. We record and report customer service complaints internally and to our Audit and Advisory Committee. There are more statistics on our website.<sup>27</sup>

## Independent Complaint Resolution Service Report

The ICRS provides a final external stage for complaints about the service delivered by SPSO under our customer service standards. It reviews our handling of service complaints and gives a view on whether we have acted in accordance with our service standards. If the ICRS finds any service failures, it makes recommendations for appropriate redress. The ICRS also offers constructive feedback and practical ideas for further improvement. The full annual report from the ICRS is available on our website.<sup>28</sup>

## Providing an accessible service

We want to be as accessible as possible to whoever needs to use our services. We work continuously to make our service accessible, regularly undertaking new initiatives to make sure we operate in line with best practice. For example, in 2017/18 we started the work necessary to create our British Sign Language Plan which will be published in 2018/19.

We encourage people to tell us of any adjustments that would make our service more accessible to them. The most common adjustment made in 2017/18 was to alter font size for people with visual impairments. We also had documents translated and made specific adjustments to make it easier for people with mental health difficulties to interact with us. Making such adjustments is now a standard, regular part of the service we provide and we track them to see if we can make improvements that would benefit others.

We ask people to complete a form which helps us monitor if there are groups of people who are under-represented among the people who bring us complaints. This year, our analysis of this data showed that there has been no significant change in the people who come to us over the last few years. They remain broadly representative of the population with the exception of age where we have an older demographic profile than the country's population.

A change to the form in 2016/17 meant this was the first year we could look at trends in responses to an expanded question around disability. We have found that we have a higher proportion of people reporting a disability than the population, and this number has increased since last year. This may reflect that the services we take complaints about can impact disproportionately on those with disabilities when things go wrong and mean they are more likely to raise complaints about them.<sup>29</sup>

<sup>27</sup> [www.spsso.org.uk/customer-service-complaints](http://www.spsso.org.uk/customer-service-complaints)

<sup>28</sup> [www.spsso.org.uk/customer-service-complaints](http://www.spsso.org.uk/customer-service-complaints)

<sup>29</sup> However, it is important to note that our forms are voluntary and people can choose whether to respond to each question or not, so we do have to exercise caution when trying to identify reasons for trends.

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On the complaints side, we saw a continuation in the increase in the number of people making complaints to us via our website. Although we can, and do, offer advice by phone, in most cases we are currently not able to take complaints by phone because of existing provisions in our legislation.

It is different for the SWF, where we take applications by phone. In 2017–18, 69% of contact with the SWF team was by phone.

Contact by phone:

**SWF 69% Complaints 25%**

**Why the big difference?**

We think it is because complaints must, according to the law, be in writing



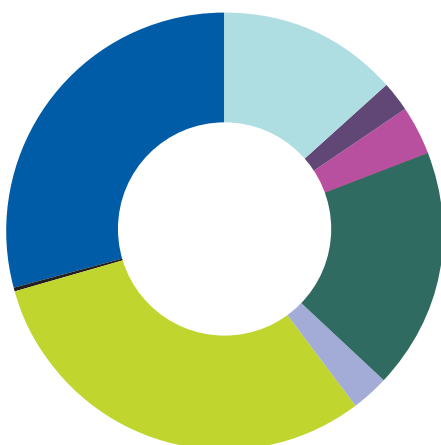
## Method of contact in 2017–18 as a % of all complaints

2017–18



Complaint Form	582	14%
CP Form (Prisons)	58	1%
Email	146	4%
Fax	5	<1%
Letter	849	21%
SPSO Contact Form	67	2%
Telephone	1,040	25%
Visit	12	<1%
Web Complaint Form	1,366	33%

2016–17



Complaint Form	560	13%
CP Form (Prisons)	102	2%
Email	143	3%
Fax	1	<1%
Letter	750	18%
SPSO Contact Form	107	3%
Telephone	1,296	31%
Visit	10	<1%
Web Complaint Form	1,213	29%

# Performance Report

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## Corporate performance

We say more about corporate performance in our Accountability Report.<sup>30</sup>

## Summary of financial performance

Our budget for 2017–18 was £4.3 million. Our expenditure was within -1.4% of the approved budget. We also generated modest revenue through our training unit. We publish information on our website on specific expenditure areas, as required under the Public Services Reform Act.<sup>31</sup>

## Environmental and sustainable development

We continue to reduce our level of carbon emissions. We are committed to supporting the Scottish Government's policies on Environmental and Sustainable Development and understand our obligations in these areas. Further to the Climate Change (Scotland) Act 2009, the Government introduced an Order in 2015 requiring all 151 public bodies that appear on the Major Player list to submit an annual climate change report, detailing their compliance with the climate change duties. SPSO is listed, and we published our third annual report in August 2017. Previously, we published a sustainability report. Our climate change and sustainability reports are available on our website.<sup>32</sup>

## ICT

Digital technologies are an important tool underpinning our service, and we closely manage this part of our service to ensure we protect the personal data and sensitive information we hold and use. The importance of cyber resilience has never been greater, and in 2017–18 we started implementing the Cyber Resilience Public Sector Action Plan and applying for Cyber Essentials Plus certification.

SPSO utilise SCOTS Connect to host our network services to provide a safe and secure digital environment. SCOTS is the name for the Scottish Government's range of managed IT services and products. Emails are sent over the secure Government Secure Intranet (GSI) network which scans all traffic for inappropriate content, blocking its access to the system. Firewalls ensure that only trusted/secure websites are able to be accessed by staff.

In addition to this work, in 2017–18 we undertook a planned hardware renewal and made initial preparations for moving onto SCOTS X platform, which includes Windows 10 operating system and Office 2016 software. These continuing improvements ensure we operate in an efficient and secure IT environment.



During 2017–18  
we were awarded  
the **Living Wage**  
**Accreditation**  
status

<sup>30</sup> [www.spsso.org.uk/finance](http://www.spsso.org.uk/finance)

<sup>31</sup> [www.spsso.org.uk/sustainability-reports](http://www.spsso.org.uk/sustainability-reports)

<sup>32</sup> [www.spsso.org.uk/finance](http://www.spsso.org.uk/finance)

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## Strategic Objective 6:

### To support public service improvement in Scotland

To support public services to learn from complaints and improve service delivery, we continued to raise awareness of our wider role. We did so by supporting public service providers to improve outcomes for the public through their learning from SPSO enquiries, decisions and recommendations, and by working in partnership with public service providers, policy makers, scrutiny bodies and regulators to further those improvements.

#### Thematic report: Making Complaints Work for Everyone

We published our second thematic report: "Making Complaints Work for Everyone".<sup>33</sup> The report, launched at a conference co-organised by SPSO, Queen Margaret University and the University of Glasgow, focuses on the impact of complaints on staff and organisations who have been complained about. The conference was attended by 91 delegates and speakers from the Scottish Government, NHS, local authorities, housing associations, further education, higher education, and other ombudsman services. It brought together academic and practitioner perspectives to explore the effects of complaints on public-service employees and the ways in which organisations could support employees who have been subject to a complaint.

In her opening address at the conference, the Ombudsman, Rosemary Agnew, discussed the main findings of the report. Whilst organisations are increasingly likely to describe themselves as 'learning organisations', research indicates that being subject to a complaint can have an adverse impact on the individual involved and can limit, rather than promote, learning. Staff are likely to perceive complaints negatively, often attributed to lack of organisational support, which is at odds with leadership aspirations to be a learning organisation.

In conclusion, the report proposes that organisations need to actively support their staff through complaints processes and engage employees in positive and purposeful activities to manage and learn from complaints. Getting this right will encourage staff, help drive improvement in services and promote learning.

The report contains information about a range of resources that organisations can draw on, and we encourage the use of these resources to support staff through the complaints process.

#### Sharing complaints outcomes

Each month the Ombudsman publishes an e-newsletter covering the reports of complaints we investigated and closed together with information about any significant trends and issues identified from the cases we investigated. In 2017–2018 through our investigations we made 734 decisions on complaints.

At the end of our investigation, we publish<sup>34</sup> our findings, conclusions, decision and recommendations in one of two ways.

- 1 public decision reports which summarise decisions we have made, where we have communicated the outcome by a decision letter to the complainant and to the appropriate organisation.
- 2 public investigation reports. These are detailed reports of our investigation, often issued where a complainant has suffered significant injustice and/or a case has wider public interest.

<sup>33</sup> [www.valuingcomplaints.org.uk/spsa-thematic-reports](http://www.valuingcomplaints.org.uk/spsa-thematic-reports)

<sup>34</sup> We do not publish our findings in a very small amount of cases where, due to the specific circumstances of the complaint, confidentiality may not be maintained when publishing.

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All published reports are sent to the Scottish Parliament and Scottish Ministers. We publish them on our website and in other forms of communication, for example the Ombudsman's monthly e-newsletter. Making this information publicly available, helps the public and public authorities to understand what we do and to learn from complaints that we have investigated.

We provide annual letters<sup>35</sup> to all councils, NHS boards, the Scottish Prison Service and water providers. Each letter includes a breakdown of the complaints we investigated by subject and outcome for each organisation. This information helps organisations to use it in conjunction with their own local management information to understand complaints in the widest sense. It helps organisations to promote the development of enhanced customer services, take action to resolve poor quality services, support the redefinition of the way services are delivered using learning from customer complaints and enables the sharing of good practice across organisational and sector boundaries.

## Supporting authorities' learning

The focus of our learning and improvement work is on building our capacity to drive improvement through learning from complaints, especially by the authorities that bring us the largest volume of complaints or that exhibit repeat failings or systemic complaints handling issues. We continued this work during this year by improving the way in which we make recommendations and by working closely with bodies to improve their complaints handling performance.

## Direct support

We built on work started last year to work closely with two organisations throughout the year to improve complaints handling performance. The support we provided included the development of organisational specific e-learning resources and quality assurance processes for the complaints handling function.

## Equality and diversity: using casework to make a difference

Our casework allows us not only to reflect on our service but also to support improvements generally.

### Case Study

In one case (201700486<sup>36</sup>) we identified that a policy did not appropriately provide parity between mental and physical health. A GP practice policy appeared to only allow for home visits if there was a physical health problem. In this case, they did not consider the complainant's significant mental health problem meant that he was housebound despite a letter from a psychiatrist confirming this was the case.

We have asked the practice to apologise to the individual but also to review their policy to ensure it has due regard to mental as well as physical health which will have wider benefits.



We also look across our casework to identify themes and ensure our commitment to equality is reflected. Findings were reflected in our thematic report on "Making Complaints Work for Everyone" where we included specific support and guidance on equality issues and making reasonable adjustments (taking advice from the Equality and Human Rights Commission).

<sup>35</sup> [www.spsa.org.uk/statistics-2017-18](http://www.spsa.org.uk/statistics-2017-18)

<sup>36</sup> [www.spsa.org.uk/decision-reports/2018/may/decision-report-201700486-201700486](http://www.spsa.org.uk/decision-reports/2018/may/decision-report-201700486-201700486)

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## Looking forward

### Revised strategic aims

We revised our strategic aims to better reflect our developing role and remit. Our business plan directly incorporates these to show how everything we do contributes to our vision and aims.



#### Vision

The Scottish Public Services Ombudsman contributes actively and positively to Scotland's development and delivery of first class public services: putting people and learning at the heart of what we do by being innovative and world-leading in our approach to complaints, reviews and standards.



#### Strategic aims

- 1** be recognised and consulted as a world-leading Ombudsman service of independent accessible experts with a reputation for: being run transparently and efficiently, governed effectively, and leading by example in the delivery of the full range of statutory functions
- 2** develop organisational capacity to: deliver existing statutory functions efficiently, proportionately and effectively, and develop and adopt new, or enhanced, services and functions
- 3** drive improvement in Scottish public services by setting and applying high complaints handling and review standards and promoting a culture and practice where learning and improvement from complaints or reviews is embedded in practice, governance and organisational systems
- 4** enable and support the Scottish public sector to achieve and maintain high standards of policy and practice through a combination of sharing learning from SPSO complaints and reviews, monitoring, advice and guidance, training and appropriate collaboration
- 5** through active engagement, help people know about their rights to complain or request a review, and help them understand what standards and level of services they can expect and how to access them easily and responsibly



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## Support and intervention policy

Our learning and improvement, communication and CSA officers work together as part of the new team we created in 2017–18: The Improvement, Standards and Engagement Team.

In addition to business as usual work, a major project for us is the development of a Support and Intervention Policy. It is important to us that we are transparent about what we do and why, and what public bodies and the public can expect from us. This policy will set out how we use the data we collate from complaints, feedback and other information sharing to support, or where necessary take direct intervention action with public bodies: it will cover informal feedback-based support, through to when we would use our statutory powers.

## Independent National Whistleblowing Officer (INWO)

In response to The Freedom to Speak Up Review<sup>37</sup>, the Scottish Government considered its findings to further support, encourage and promote whistleblowing. Following a public consultation, the Health Secretary announced that legislation would be introduced to Parliament to bring the functions of a new Independent National Whistleblowing Officer (INWO) to the Scottish Public Services Ombudsman, a UK first!

We anticipate that the INWO will have statutory powers to investigate concerns raised by whistleblowers and to examine health boards' culture and approach to whistleblowing, particularly where a whistleblower claims to have been unfairly treated as a result of raising a concern.

To prepare for this new function, we are working in partnership with stakeholders from the health sector and the Scottish Government to develop National Whistleblowing Standards, including Principles and a Whistleblowing Procedure to ensure the investigation of whistleblowing disclosures are standardised, consistent, properly applied and result in fair outcomes. Crucially, they promote safeguarding of patients, and those raising the concerns. A steering group is overseeing the development process, and a working group has been playing a key role in the development of the draft Standards.

### Accommodation

Did you know we are moving offices in late 2018?

The SPSO is moving from Melville Street in Edinburgh, our home since we were first set up, to McDonald Road in Edinburgh.



<sup>37</sup> [www.freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU\\_web.pdf](http://www.freedomtospeakup.org.uk/wp-content/uploads/2014/07/F2SU_web.pdf)



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